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## **REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT**

Application Number	09/517,256 TULUGY CENTER 2
Filing Date	03/02/00
First Named Inventor	Ostovic, Vlado
Group Art Unit	2834
Examiner Name	J. Waks
Attorney Docket Number	800448

To: Assistant Commissioner for Patents Washington, DC 20231								
I hereby apply to withdraw as attorney or agent for the above identified patent application.								
The reasons for this request are:								
Client refuses to pay attorney fees for preparing and filing a response to Office Action.								
·								
The correspondence address is NOT affected by this withdrawal.								
2. X Change the correspondence address and direct all future correspondence to:								
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Firm or Individual Name		Dr. Vlado Ostovic						
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This request is enclosed in triplicate.								
Name	Gail M. Taylor Russell, Reg. No. 36,290							
Signature Styl Jay Russun								
Date	July 27, 2001							
NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.								

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